REGION 10 CORPORATE EXECUTIVE INFORMATION SYSTEM (CEIS) CEIS DATA IMPROVEMENT PLAN (DIP) DATA COMPLETENESS REPORT



for TRICARE Northwest Lead Agency, Region 10 Travis AFB, California

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REGION 10 CEIS DATA IMPROVEMENT PLAN (DIP) DATA COMPLETENESS REPORT

INTRODUCTION

The Region CEIS 10 Integrated Contractor Team (ICT) performed an in-depth review of the July 1999 Data Analysis Spreadsheet produced by the CEIS Program Office. This was part of a CEIS program effort to validate the completeness of the data in CEIS. The goal was to identify ways to retrieve the data where shortages exist between the Source Systems and CEIS. This report attempts to detail areas where we feel there is a possibility of retrieving missing data records. The Data Analysis Spreadsheet used for this review performs the following comparisons (from CEIS Web Site http://www.ceis.ha.osd.mil/org/da/DAS_Details.htm):

When a user views the spreadsheet, the focus should be on the color-coded area, which contains these comparisons. The percent difference metrics is indicative of the percentage of missing data in CEIS as displayed by data type. These metrics are:

- PERCENTAGE DIFFERENCE CHCS DISP TO IDB IP: The number of inpatient disposition records in CHCS compared to the number of inpatient dispositions received/processed by CEIS. Considerations are made for the difference in definition of 'dispositions.' (Source document is the PAD 460 report from CHCS or GT MUMPS Adhoc (NMC San Diego only)).
- PERCENTAGE DIFFERENCE MEQS TO IDB IP: The number of inpatient dispositions in MEQS compared to CEIS.
- PERCENTAGE DIFFERENCE IDB TO HBOC IP: The internal comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the standard inpatient data record is complete within CEIS.
- PERCENTAGE DIFFERENCE IDB SDS TO HBOC SDS: The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the same day surgeries is complete within CEIS.
- PERCENTAGE DIFFERENCE ADS TO IDB OP: The number of standard ambulatory data records in the ADS server compared to the number of standard ambulatory records received/processed by CEIS.
- PERCENTAGE DIFFERENCE ADS TO FTDTRK OP: The number of standard ambulatory data records in the ADS servers compared to Ft. Detrick, MD.
- PERCENTAGE DIFFERENCE IDB TO HBOC OP: The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the standard ambulatory data record is complete within CEIS.
- PERCENTAGE DIFFERENCE IDB TO HBOC IP Ancil: The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the inpatient ancillary data is complete within CEIS.
- PERCENTAGE DIFFERENCE IDB TO HBOC OP Ancil: The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the outpatient ancillary data is complete within CEIS. When the indicator is red (missing data), the integrated contract team goes to the source systems (CHCS & ADS) and retrieves historical data. A yellow indicator represents a negative number, which usually is the result of pulling the source document at the wrong time. Green indicators are the desired results of the analysis. However, we are not looking for perfect data.

COLLECTED DATA

David Grant Medical Center (DMIS 0014)

Data Comparison Findings:

The information in Table 1 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified eight items that warrant further investigation because of the likelihood we may be able to retrieve the missing records. This item is the inpatient shortages of Dec 97, Jan 98, and Jul 98, Aug 98; and the outpatient shortages of Jun 98, Jul 98, Aug 98, and Dec 98.

Table 1

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0014	60th MEDICAL GROUP	SIDR	Dec 97 - Jan 98	CHCS to IDB; MEQ to IDB	Will investigate the possibility of IDB missing a SIDR transmission file and have any missing SIDR's retransmitted from Source system.
			Jul 98 - Aug 98	CHCS to IDB; MEQ to IDB	Will investigate the possibility of IDB missing a SIDR transmission file and have any missing SIDR's retransmitted from Source system.
		SADR	Jun 98 - Aug 98	ADS to IDB; ADS to FTDTK - requested historical AF ADS	Both CEIS and Ft Detrick show equal data shortages during this period. This suggests SADR transmission problems occurred. However, retrieval of the missing records is not possible because they are past the 3-month source system retrieval window. These shortages occurred the same time that all Air Force SADR was re-routed through Brooks AFB. Will investigate the possibility of the missing SADR being available through them, otherwise data in presently unretrievable.
			Dec 98	ADS to IDB; ADS to FTDTK	CEIS currently has 86% of the records for this month. Ft Detrick reports having 95% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.
			Jan 99	ADS to FTDTK	CEIS has the 99.7% of the ADS outpatient records. This is a Ft Detrick issue.

9th Medical Group, Beale AFB (DMIS 0015)

Data Comparison Findings:

The information in Table 2 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified three items that warrant further investigation because of the likelihood we may be able to retrieve the missing records.. These item are the inpatient shortages from Mar 97 – Apr 98.

Table 2

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0015	9th MEDICAL GROUP	SIDR	Mar 97	CHCS to IDB; MEQ to IDB	This facility was an inpatient facility only until Apr 98, apparently the historical SIDR was never loaded when the HBOC was brought online. Since inpatient record numbers are low (highest number is 8). Will attempt to retrieve all historical inpatient records possible from the local CHCS system.
			Sep 97	CHCS to IDB	This facility was an inpatient facility only until Apr 98, apparently the historical SIDR was never loaded when the HBOC was brought online. Since inpatient record numbers are low (highest number is 8). Will attempt to retrieve all historical inpatient records possible from the local CHCS system.
			Oct 97 - Apr 98	CHCS to IDB - no IDB data	This facility was an inpatient facility only until Apr 98, apparently the historical SIDR was never loaded when the HBOC was brought online. Since inpatient record numbers are low (highest number is 8). Will attempt to retrieve all historical inpatient records possible from the local CHCS system.
		SADR	Oct 97 - Dec 97	ADS to IDB; ADS to FTDTK - ADS is lower	This problem is caused when the local ADS system has a catastrophic failure causing loss of most of the outpatient records for this period. Because of this unrecoverable loss of records reports from ADS that are used for comparison with CEIS under-reports the actual visits for these months.

Lemoore Naval Hospital (DMIS 0028)

Data Comparison Findings:

The information in Table 3 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified three items that warrant further investigation because of the likelihood we may be able to retrieve the missing records. These item are the inpatient shortage of Feb 99 and the outpatient shortages of Aug 98 and Nov 98.

Table 3

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0028	NH LEMOORE	SIDR	Feb 99	CHCS to IDB; MEQ to IDB	Need to investigate the possibility of IDB missing a SIDR transmission file. Have any missing SIDR's retransmitted from Source system.
		SADR	Oct 97	ADS to IDB; ADS to FTDTK	Both CEIS and Ft Detrick show equal data shortages during this period. This suggests SADR transmission problems occurred. However, retrieval of the missing records is not possible because they are past the 3-month source system retrieval window. This data is presently unretrievable.
			Aug 98	ADS to IDB	CEIS currently has 94% of the records for this month. Ft Detrick reports having 100% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved from the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.
			Nov 98	ADS to IDB	CEIS currently has 94% of the records for this month. Ft Detrick reports having 100% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.

750th Medical Squadron, Onizuka (DMIS 0235)

Data Comparison Findings:

The information in Table 4 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table there are no items that require investigation. Since this facility is now closed and there are no data issues, it will no longer appear on these reports.

Table 4

DMIS ID	Facility	Data Type	Issue Month	Regional CEIS ICT Comments/ Action Plan
	750th MEDICAL SQUAD	SIDR	N/A	No Action Required
		SADR	No Issues	No Action Required

77th Medical Group, McClellan AFB (DMIS 0250)

Data Comparison Findings:

The information in Table 5 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified five items that warrant further investigation because of the likelihood we may be able to retrieve the missing records. These item are the inpatient shortages of Dec 97 - Apr 98.

Table 5

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0250	77th MEDICAL GROUP	SIDR	Dec 97 - Apr 98	CHCS to IDB; MEQ to IDB	This facility was an inpatient facility only until Apr 98, apparently all the historical SIDR was never loaded when the HBOC was brought online. Will attempt to retrieve all historical inpatient records possible from the local CHCS system.
			May 98 - Sep 98	No CHCS data	This facility was an inpatient facility only until Apr 98.
		SADR	Oct 98 - Apr 99	ADS to FTDTK - FTDTK is higher	CEIS matches ADS exactly. This is a Ft Detrick issue.

CONCLUSION

Summary of Findings

The analysis of the discrepancies of the July 1999 DAS revealed 3 months where there is a possibility of retrieving inpatient records where CEIS is short and 33 months where there is a possibility of retrieving outpatient records where CEIS is short.

While there is a possibility of retrieving these records several issues exist which may impact our ability to obtain a completeness level of 95% or greater.

- 1. The local ADS systems have the ability to generate a Local SADR Extract for the months we are short, but this type of extract pulls the patient's current enrollment status versus providing the patients enrollment status at the time of the visit. Because of this enrollment status issue, the CEIS Program Management Office has mandated that no ADS Local Extracts be performed after 3 months time has passed. All of the present outpatient record shortages are older than 3 months leaving this option out.
- 2. An alternative method is to obtain the records from Ft Detrick to fill CEIS outpatient record shortages. However, Ft Detrick many times has less or equal amounts as we do in the short months or have more records but not enough to fill the holes to the 95% goal.
- 3. Presently we are updating the CEIS HBOC databases with data from the IDB-R. Because of issues with the way the IDB-R extracts outpatient records the possibility of duplicate records exists. For this reason we are presently not loading any outpatient IDB-R data for any Fiscal Years other than 1999. All but one of the of the outpatient data shortage months are in Fiscal Years prior to 1999, so even if we could get the missing data from Ft Detrick it will be an indefinite period of time before we are able to load it.

Plan

The ICT is committed to having the most complete data possible. The following plan will be instituted to fix the holes in months where the data does not meet the 95% goal and there is presently a means to possibly retrieve the data.

- 1. Inpatient Shortage Fix Procedures
 - We will investigate missing SIDR transmissions and obtain a regeneration of any missing SIDR file from CHCS for the following:
 - David Grant Medical Center Dec 97, Jan 98, Jul 98, Aug 98
 - 9th Medical Group Mar 97 through Apr 98
 - NH Lemoore Feb 98
 - 750th Medical Group Dec 97 through Apr 98
- 2. Outpatient Shortage Fix Procedure
 - We will seek approval for the pulling of the outpatient records from Ft Detrick for the following facilities and months:
 - David Grant Medical Center Jan 98, Jul 98, Aug 98, Dec 98
 - NH Lemoore Aug 98, Nov 98